PTO/SB/01 (05-03)

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DECLARATION	FOR LITH I		Attorney D	ocket Number	PHUS030446US2			
DESIGN			First Name	ed Inventor	LEUSSLER, et al.			
PATENT APPLICATION			COMPLETE IF KNOWN					
(37 CI	(37 CFR 1.63)			Number				
Declaration	Declaration		Filing Date					
Declaration Submitted OR	Submitt	Submitted after Initial						
With Initial Filing		surcharge R 1.16 (e))	Examiner N	Jame		·····		
	require	d) [	-					
I hereby declare that:								
	- "Y			-1				
Each inventor's residence, ma	ailing address, a	ind citizenship are a	as stated b	elow next to th	eir name.			
I believe the inventor(s) name which a patent is sought on the			inventor(s	) of the subject	matter wh	ich is claimed	and for	
			CLIEV MAI					
RF COIL SYSTEM FOR SUPER HIGH FIELD (SHF) MRI								
		(Title of the	Invention)					
the specification of which								
is attached hereto								
OR								
was filed on (MM/DD/YYYY) 11/18/2003 as United States Application Number or PCT Interna						International		
The med on (Min 22)		2072.005	] 30 0,	Led Oraces App			пспанова	
Application Number 60/	520,979	and was amende	d on (MM/I	DD/YYYY)		(if	f applicable).	
l hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as								
amended by any amendment	specifically refe	erred to above.						
I acknowledge the duty to c								
continuation-in-part application and the national or PCT interests.					the filing d	late of the pric	r application	
I hereby claim foreign priorit	y benefits unde	r 35 U.S.C. 119(a	)-(d) or (f)	, or 365(b) of				
inventor's or plant breeder's country other than the United								
application for patent, invento	or's or plant bree	eder's rights certific						
before that of the application	on which priority							
Prior Foreign Application Number(s)	Country	Foreign Filing		Priori Not Clai		Certified Cop Yes	y Attached? No	
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. [Page 1 of 2]

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This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	ect all correspondence to: Customer Number OR Correspondence address below							
Name			*************	************	***********	***************************************	***************************************	
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST IN	VENTOR:		Пар	etition	has be	en filed for this	s unsigr	ned inventor
Given Name (first and middle [if any]) Christoph G.			***************************************	Family Name of Symame LEUSSLER				
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(first and middle [if any]) Christian					β	NUERLEE		
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Additional inventors or a legal re	presentative are be	ing named or	the ONE	suppleme	ental shee	et(s) PTO/SB/02A	or 02LR	attached hereto.

## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

			***************************************			
Name of Additional Joint Inventor, if ar	ıy:	A petition has been	filed for th	nis unsigned inventor		
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Given Zhiyong Name		ZHAI Family Name or Surname	************	<u>,</u>		
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Mailing Address						
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